Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

127401

|   | ,<br>  | CLAIMS AS                                 | FILED -<br>(Column             |                               | mn 2)                                 |                              | SMALL ENTITY TYPE   |                   |                        | OTHER THAN OR SMALL ENTITY |                     |                        |
|---|--|---|--------------------------------|-------------------------------|---------------------------------------|------------------------------|---------------------|-------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   | 17                             |                               |                                       |                              |                     | RATE              | FEE                    |                            | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED                   |                               | NUMBER EXTRA                          |                              | В                   | ASIC FEE          | 375.00                 | OR                         | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | /7 minus 20=                   |                               | *                                     |                              |                     | X\$ 9=            | 42                     | OR                         | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | 4 mir                          | nus 3 =                       | * /                                   |                              |                     | X42=              |                        | OR                         | X84=                |                        |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT                         |                               | -                                     |                              |                     | +1,40=            |                        | OR                         | +280=               |                        |
| * If  | the difference                                 | in column 1 is                            | less than zero, enter "0" in o |                               |                                       | olumn 2                      | <b>-</b>            | TOTAL             | 417                    | OR                         | TOTAL               |                        |
|   | CLAIMS AS AMENDED - PART II                    |   |                                |                               |                                       |                              |                     |                   |                        |                            | OTHER               |                        |
|   |  | (Column 1)                                |                                | (Colur                        |                                       | (Column 3)                   | SMALL               |                   | NTITY                  | OR                         | SMALL               | ENTITY                 |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                          | PRESENT<br>EXTRA             |                     | RATE              | ADDI-<br>TIONAL<br>FEE | r X                        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                          | **                            |                                       | =                            |                     | X\$ 9=            |                        | OR                         | X\$18=              |                        |
|   | Independent                                    | * NTATION OF M                            | Minus                          | ***                           | T CL AIM                              | =                            |                     | X42=              |                        | OR                         | X84=                |                        |
| L   | TINOT FILESE                                   | INTATION OF IM                            |                                | LINDLINI                      | CEANIN                                |                              |                     | +140=             |                        | OR                         | +280=               |                        |
|   | en e       |   |                                |                               | •                                     |                              | ÀD                  | TOTAL<br>DIT. FEE |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Column 1)                                |                                | (Colur                        | mn 2)                                 | (Column 3)                   |                     |                   |                        |                            |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                          | PRESENT<br>EXTRA             |                     | RATE              | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                          | **                            |                                       | =                            |                     | X\$ 9=            |                        | OR                         | X\$18=              | ·                      |
|   | Independent                                    | *   | Minus                          | ***                           | - OL 4 13 4                           | =                            |                     | X42=              |                        | OR                         | X84=                |                        |
|   | TINST PRESE                                    | NTATION OF M                              | JLI IPLE DEF                   | 'ENDEN I                      | CLAIM                                 |                              |                     | +140=             |                        | OR                         | +280=               |                        |
|   | *  |   | AD                             | TOTAL<br>DIT. FEE             |                                       | OR                           | TOTAL<br>ADDIT. FEE |                   |                        |                            |                     |                        |
|   |  | (Column 1)                                | (Column 3)                     | ·<br>•                        |                                       |                              |                     |                   |                        |                            |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                          | PRESENT<br>EXTRA             |                     | RATE              | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                          | **                            | · · · · · · · · · · · · · · · · · · · | =                            |                     | X\$ 9=            |                        | OR                         | X\$18=              |                        |
|   | Independent                                    | *   | Minus                          | ***                           | - CL AINA                             | =                            |                     | X42=              |                        | OR                         | X84=                |                        |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                |                               |                                       |                              |                     | +140=             |                        | OR                         | +280=               |                        |
| *   | If the entry in colu                           | mn 1 is less than to                      | ne entry in colu               | mn 2, write                   | e "0" in co                           | lumn 3.<br>n 20. enter "20." | <u> </u>            | TOTAL             |                        | OD.                        | TOTAL               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                                |                               |                                       |                              |                     |                   |                        |                            |                     |                        |